



Crown Classical of Jackson

Program Tuition and Information

2025-2026

- **Non-Refundable** Application Fee: \$200/family
- For families w/one student.....\$2400/yr
- For families w/two students.....\$4300/yr
- For families w/three students.....\$5800/yr
- For families w/four or more students.....\$6900/yr

PAYMENT TERMS

- You have two options for paying tuition:
Pay in full with registration or pay monthly beginning in August through May (divide tuition by 10)
- For Families that begin mid-year: You will pay the registration fee and pick up the monthly payments for however many months you are enrolled through May 2026.
- If a financial emergency arises which makes payment of tuition on time impossible, a written statement with details of the problem and a proposal for payment should be submitted *prior* to the due date.
- If checks are returned due to insufficient funds, there will be a \$30 fee.

PLEASE NOTE: All enrolled PreK-8th students must commit to a full day in Crown Classical each Tuesday and Thursday. The option to select classes or days for a discounted tuition rate is not available.



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Family Application

Father's Name _____ Mother's Name _____

Home Address _____

City _____ Zip _____

Father's Cell _____ Father's Email _____

Mother's Cell _____ Mother's Email _____

Emergency Contact (relation) _____ Phone _____

Medical Insurance or Medical Share Provider _____

Considering and Accommodating Special Needs

Crown Classical is a community of homeschooling families. Because we only meet two days of the week, it is important to maintain a productive, efficient, and restful atmosphere in the classroom. We do not have the resources to accommodate all the needs of some students, but welcome those families looking to help us help their child. We believe this partnership is important to our hope that it's individual members would be free, strong, and mature. Parents desiring this partnership agree to the following statements:

- It is helpful for the director and beneficial for the student for the parent to communicate any special needs their child requires on the family application.
- The director will defer to the family application for student placement but may reserve the right to recommend adjustments based on classroom observations and experience.
- It is necessary and appropriate for both age and ability to be considered to maintain a vibrant, efficient, and safe learning atmosphere in the classroom. Students must be capable of respecting and following community and classroom rules.
- Should a student require more personal attention or regular redirection, the parent will be expected to take on this role by being present in the classroom with the student at all times. This level of individual help is above and beyond director and mentor expectations.

Please initial that you have read and agree with these statements: _____

STUDENT INFORMATION (PLEASE LIST ALL STUDENTS)

Student's Name:_____

DOB:_____Age:_____Grade Entering:_____Allergies:_____

Describe any learning challenges or special needs student has:_____

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Student's Name:_____

DOB:_____Age:_____Grade Entering:_____Allergies:_____

Describe any learning challenges or special needs student has:_____

*If registering more than five students, please print extra copies of this page



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MISSION

Crown Classical is dedicated to *partnering with parents* to challenge, empower, and inspire children to think critically, reason clearly, and communicate eloquently to glorify God on the path of lifelong learning.

STATEMENT OF FAITH

The Apostles' Creed expresses what we believe in these words: *We believe in God the Father Almighty, Maker of heaven and earth; and in Jesus Christ his only Son our Lord, who was conceived by the Holy Spirit, born of the virgin Mary, suffered under Pontius Pilate, was crucified, died, and was buried. He descended into Hell. The third day he rose again from the dead. He ascended into heaven, and is seated at the right hand of God the Father Almighty; from there he will come to judge the living and the dead. We believe in the Holy Spirit, the holy catholic* church, the communion of saints, the forgiveness of sins, the resurrection of the body, and the life everlasting.*

*catholic = universal

PARENT COMMITMENT

As a supporting member of Crown Classical, a parent-founded community, I understand that *parent participation is essential to the overall wellness and success of this community*. The church is a body with many members, and each member has an important role to play for the good of the whole body (I Cor. 12:12). While it is not necessary for me to be on campus with my student(s) each day, I understand that serving in my community is a simple way for me to love my neighbor (Matthew 22:39) and a practical opportunity for me to model this virtue for my children.

Please prayerfully consider the above Mission Statement, our Statement of Faith, and our Parent Commitments. **By signing this Covenant, you are stating that you share, agree with and to these disclosed statements, and your community will expect you to honor the commitment you have made.**

Signature _____ Date _____



WAIVER of LIABILITY, DISCLAIMER & PERMISSION

Please complete one form for each student you are registering with Crown Classical. These forms must accompany your Family Application before your application will be considered complete and ready for review.

We, the undersigned parents or legal guardians of _____ (Student's Name or Family Name—hereby referred to as “Student/s”) hereby give permission for Student/s to participate in this Activity and all events associated with the Activity. In the event of an accident or illness (and after reasonable attempt has been made to reach us or if circumstances do not allow time to make such an attempt), we hereby authorize Crown Classical Corp., its authorized representatives, Director, employees, agents participating and/or supervising parents (“Crown Classical Corp”) to seek and to consent for medical treatment for Student/s. We hereby consent to any examination, x-ray, anesthetic, medical or surgical procedure, treatment and/or hospital care deemed advisable by a physician, surgeon or dentist. All costs incurred for such medical treatment shall be our sole responsibility.

We hereby release, discharge, and hold harmless Crown Classical Corp. from any claims arising out of or relating to the decisions made while acting as our Agent in these respects during this activity.

We, the undersigned parents or legal guardians of Student/s, understand that Student/s participation in Crown Classical Corp. is voluntary and we accept the inherent risks that may be associated with Student/s participating in this homeschool community such as but not limited to: playing on the playground, nature study, science experimentation and other learning activities Student/s will participate in during his/her community day. In exchange for permitting the voluntary participation of Student/s in its programs, we hereby release, discharge, and hold harmless Crown Classical Corp. from any claims arising out of or relating to any physical injury that may result to Student/s, while participating in a Crown Classical Corp. sponsored event, including, but not limited to, any physical injury by the negligence of any peer, or Academic Mentor or parent assistant while participating in or performing his/her duties during the meeting days of Crown Classical Corp.

We understand and acknowledge by signing below, that the Nature Study Activities may carry inherent risks that Crown Classical Corp. will have no control over, such as but not limited to exposure to bees, wasps, fire ants, poison ivy, snakes, and other wildlife that could cause injury to Student/s. We understand that Student/ss participation in nature walks is voluntary, and we can decide at any time for Student/s not to participate. We accept the inherent risks and full responsibilities associated with this Activity and we hereby release, discharge, and hold harmless Crown Classical Corp. from any claims arising out of or relating to any physical injury that may result to Student, while participating in this Activity, including physical harm by the negligence of any peer, allergic reactions and other unforeseen dangers.

Parents/Guardians agree to be responsible for any damages to the Church's property that are directly caused by any person in their family or persons of which they are legal or implied guardians.

_____Student requires/carries special medication for life threatening situations. We understand that to maintain Student's safety, **at least one of us will need to remain on campus for the entire community day, unless permission to drop off is given by the Director.** Without permission, we may not drop off Student because the Director, Academic Mentors and participating parents are unable to administer medications.

_____Student has no known medical conditions that are life threatening or require special medications to be administered.

Signature_____Date_____
(Parent or Legal Guardian)

Signature_____Date_____
(Parent or Legal Guardian)

Describe your family's homeschooling experience.

If you are a new applicant, why are you looking for a homeschooling community or for a new homeschooling community?

What are your homeschooling goals? How do you see the Crown Classical community helping you to meet those goals?

We assume all applicants are excited about being involved and contributing in some capacity. As an active and vital member of a homeschooling community and taking into consideration your background, personal experiences, passions, and interests, where or how do you see yourself serving in Crown Classical community?

What church do you attend? How long?

What days and times work for a 30 minute family interview with Sara Fuller and Julie Chhim? We would love to sit down and have a chat about who we are and how we can best serve your family. We also want to make sure you understand what Crown Classical of Jackson's philosophy of education is and how we will teach.